

General

Title

Hepatopancreatobiliary (HPB) cancer: number of surgical resections for pancreatic, duodenal, or distal biliary tract cancer performed by each surgeon/centre in a given year.

Source(s)

NHS Scotland, Scottish Cancer Taskforce. Hepatopancreatobiliary cancer clinical quality performance indicators. Edinburgh (Scotland): Scottish Government, Healthcare Improvement Scotland; 2015 Mar. 35 p. [14 references]

Measure Domain

Primary Measure Domain

Clinical Quality Measures: Structure

Secondary Measure Domain

Does not apply to this measure

Brief Abstract

Description

This measure is used to assess the number of surgical resections for pancreatic, duodenal, or distal biliary tract cancer performed by each surgeon/centre in a given year.

Note from the National Quality Measures Clearinghouse: This measure is part of the Cancer Quality Performance Indicators (QPIs) collection. For more information, including a complete list of QPI measure sets, please visit the [Healthcare Improvement Scotland Web site](#).

Rationale

Pancreatic resectional surgery should be performed by surgeons who work in a specialist multidisciplinary team (MDT) in a specialist centre, with outcomes audited regularly and benchmarked nationally (de Wilde et al., 2012).

Surgical resection should be confined to specialist centres to increase resection rates and reduce hospital

morbidity and mortality (Pancreatic Section, British Society of Gastroenterology et al., 2005).

The literature demonstrates that there is a relationship between increasing surgical volumes for major hepatopancreatobiliary resections and improved patients outcomes (mortality) (Association of Upper Gastrointestinal Surgeons of Great Britain and Ireland, 2010).

Evidence for Rationale

Association of Upper Gastrointestinal Surgeons of Great Britain and Ireland (AUGIS). Guidance on minimum surgeon volumes. London (UK): Association of Upper Gastrointestinal Surgeons of Great Britain and Ireland (AUGIS); 2010 Oct. 5 p. [19 references]

de Wilde RF, Besselink MG, van der Tweel I, de Hingh IH, van Eijck CH, Dejong CH, Porte RJ, Gouma DJ, Busch OR, Molenaar IQ, Dutch Pancreatic Cancer Group. Impact of nationwide centralization of pancreaticoduodenectomy on hospital mortality. Br J Surg. 2012 Mar;99(3):404-10. [PubMed](#)

NHS Scotland, Scottish Cancer Taskforce. Hepatopancreatobiliary cancer clinical quality performance indicators. Edinburgh (Scotland): Scottish Government, Healthcare Improvement Scotland; 2015 Mar. 35 p. [14 references]

Pancreatic Section, British Society of Gastroenterology, Pancreatic Society of Great Britain and Ireland, Association of Upper Gastrointestinal Surgeons of Great Britain and Ireland, Royal College of Pathologists, Special Interest Group for Gastro-Intestinal Radiology. Guidelines for the management of patients with pancreatic cancer periampullary and ampullary carcinomas. Gut. 2005 Jun;54 Suppl 5:v1-16.

Primary Health Components

Pancreatic cancer; duodenal cancer; distal biliary tract cancer; surgical resection; volume of cases per surgeon/centre

Denominator Description

This measure applies to surgeons/centres who perform surgical resections for pancreatic, duodenal, or distal biliary tract cancer (one surgeon/centre at a time).

Numerator Description

Number of surgical resections for pancreatic, duodenal, or distal biliary tract cancer performed by each surgeon/centre in a given year

Evidence Supporting the Measure

Type of Evidence Supporting the Criterion of Quality for the Measure

A clinical practice guideline or other peer-reviewed synthesis of the clinical research evidence

A formal consensus procedure, involving experts in relevant clinical, methodological, public health and organizational sciences

One or more research studies published in a National Library of Medicine (NLM) indexed, peer-reviewed

Additional Information Supporting Need for the Measure

Unspecified

Extent of Measure Testing

The collection of data is piloted on a small number of patient records using a paper data collection form produced by the Information Services Division (ISD). The aim is to identify any anomalies or difficulties with data collection prior to full implementation. At least one NHS board in each Regional Cancer Network participates in the pilot.

Evidence for Extent of Measure Testing

NHS Scotland. National cancer quality performance indicators: overview of development process. Edinburgh (Scotland): NHS Scotland; 2012 Dec. 7 p.

State of Use of the Measure

State of Use

Current routine use

Current Use

not defined yet

Application of the Measure in its Current Use

Measurement Setting

Hospital Inpatient

Hospital Outpatient

Professionals Involved in Delivery of Health Services

not defined yet

Least Aggregated Level of Services Delivery Addressed

Single Health Care Delivery or Public Health Organizations

Statement of Acceptable Minimum Sample Size

Does not apply to this measure

Target Population Age

Does not apply to this measure

Target Population Gender

Does not apply to this measure

National Strategy for Quality Improvement in Health Care

National Quality Strategy Aim

Better Care

National Quality Strategy Priority

Institute of Medicine (IOM) National Health Care Quality Report Categories

IOM Care Need

Not within an IOM Care Need

IOM Domain

Not within an IOM Domain

Data Collection for the Measure

Case Finding Period

Unspecified

Denominator Sampling Frame

Professionals/Staff

Denominator (Index) Event or Characteristic

Health Professional Characteristic

Denominator Time Window

not defined yet

Denominator Inclusions/Exclusions

Inclusions

This measure applies to surgeons/centres who perform surgical resections for pancreatic, duodenal, or distal biliary tract cancer (one surgeon/centre at a time).

Exclusions

None

Exclusions/Exceptions

not defined yet

Numerator Inclusions/Exclusions

Inclusions

Number of surgical resections for pancreatic, duodenal, or distal biliary tract cancer performed by each surgeon/centre in a given year

Exclusions

None

Numerator Search Strategy

Fixed time period or point in time

Data Source

Electronic health/medical record

Paper medical record

Type of Health State

Does not apply to this measure

Instruments Used and/or Associated with the Measure

Unspecified

Computation of the Measure

Measure Specifies Disaggregation

Does not apply to this measure

Scoring

Rate/Proportion

Interpretation of Score

Desired value is a higher score

Allowance for Patient or Population Factors

not defined yet

Standard of Comparison

not defined yet

Prescriptive Standard

Target: Minimum 11 procedures per centre, with a minimum of 4 procedures per surgeon, in a 1 year period.

This is a minimum target level and is designed to ensure that all surgeons performing pancreatic resection perform a minimum of 4 procedures per year.

Evidence for Prescriptive Standard

NHS Scotland, Scottish Cancer Taskforce. Hepatopancreatobiliary cancer clinical quality performance indicators. Edinburgh (Scotland): Scottish Government, Healthcare Improvement Scotland; 2015 Mar. 35 p. [14 references]

Identifying Information

Original Title

QPI 12 – volume of cases per centre/surgeon.

Measure Collection Name

Cancer Quality Performance Indicators (QPIs)

Measure Set Name

HepatoPancreatoBiliary Cancer

Measure Subset Name

HepatoPancreatoBiliary Cancers (excluding HCC) QPIs

Submitter

NHS Scotland - National Government Agency [Non-U.S.]

Scottish Cancer Taskforce - National Government Agency [Non-U.S.]

Developer

NHS Scotland - National Government Agency [Non-U.S.]

Scottish Cancer Taskforce - National Government Agency [Non-U.S.]

Funding Source(s)

Scottish Government

Composition of the Group that Developed the Measure

HepatoPancreatoBiliary (HPB) Cancer QPI Development Group

Financial Disclosures/Other Potential Conflicts of Interest

Unspecified

Adaptation

This measure was not adapted from another source.

Date of Most Current Version in NQMC

2015 Mar

Measure Maintenance

The Cancer Quality Performance Indicators (QPIs) will be kept under regular review and be responsive to changes in clinical practice and emerging evidence.

Date of Next Anticipated Revision

Unspecified

Measure Status

This is the current release of the measure.

Measure Availability

Source document available from the [Healthcare Improvement Scotland Web site](#) .

For more information, contact the Healthcare Improvement Scotland at Gyle Square, 1 South Gyle

Companion Documents

The following is available:

NHS Scotland. National cancer quality performance indicators: overview of development process. Edinburgh (Scotland): NHS Scotland; 2012 Dec. 7 p. This document is available from the [Healthcare Improvement Scotland Web site](#) .

NQMC Status

This NQMC summary was completed by ECRI Institute on May 23, 2017.

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Production

Source(s)

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